**Incident Report Form for Reporting Bullying**

(Any person can report alleged bullying using this form)

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date | / /  (dd/mm/yyyy) | |  | | | | | |
|  | | | | | | | | |
| Name of the person reporting the incident | | | | | | | | |
|  | | | | | | | | |
| Position/ Relationship | | | | | | | | |
|  | | | | | | | | |
| Name of victim/target | | | | | | | | |
| Names (s) of alleged offender (s) if known | | | Age | Is he/she a student | | |  | Form/Class |
|  | | |  | Yes |  | No |  |
|  | | |  | Yes | No |  |
|  | | |  | Yes | No |  |
|  | | |  | Yes | No |  |
|  | | |  | Yes | No |  |
|  | | | | | | | | |
| On what date (s) did the incident happen? | | | / /  (dd/mm/yyyy | | / /  (dd/mm/yyyy | | / /  (dd/mm/yyyy | |
| Where did the incident happen? | | | | | | | | |
|  | | | | | | | | |
| **Place a tick (√) next to the statement(s) that best describes what happened (choose all that apply):** | | | | | | | | |
|  | Hitting, kicking, shoving, spitting, hair pulling, or throwing something | | | | | | | |
|  | Ridiculing another pupil’s appearance, way of speaking or personal mannerisms | | | | | | | |
|  | Taunting, name-calling, threatening, or making critical / offensive remarks. | | | | | | | |
|  | Belittling another pupil’s abilities and achievements or making him/her the victim of jokes | | | | | | | |
|  | Making rude and/or threatening gestures | | | | | | | |
|  | Deliberately excluding or isolating a student | | | | | | | |
|  | Interfering with another pupil’s property, by stealing, hiding or damaging it | | | | | | | |
|  | Spreading hurtful or untruthful rumours or gossip about another pupil or his/her family | | | | | | | |
|  | Cyber bullying- intimidation or harassment via mobile phones or the internet | | | | | | | |
|  | Other (specify): | | | | | | | |
| Was the target of bullying/ harassment absent from school as a result of the incident? | | | | | | | |  |
| If Yes, how many days was the target of bullying/harassment absent from schools | | | | | | | | (days) |
| In your view, did this incident cause emotional or psychological harm/distress?  5 (Very serious) | | | | | | | | |
| 4  3 (some)  1  (none)  2 | | | | | | | | |
|  | | | | | | | | |
| What did the alleged offender(s) say or do?  (Please give details of what happened, where, who was involved and if it has happened before.) | | | | | | | | |
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| Can you offer an opinion regarding why this incident might have happened?  (Attach a separate sheet if necessary) | | | | | | | | |
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| Is there any additional information you would like to provide?  (Attach a separate sheet if necessary) | | | | | | | | |
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| Signature of the person reporting:  (or staff member) | |  | | | | | | |
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